

GENERAL FACT SHEET

BILL NUMBER 12R-104

BRIEF TITLE	APPROVAL DEADLINE	REASON
Oil Analysis Reporting and Related Supplies, Quote 3900		Multiple Year Contract

DETAILS

POSITIONS/RECOMMENDATIONS

Resolution to provide Oil Analysis Reporting and Related Supplies, Quote 3900 from Tribologik Corporation, effective upon execution by both parties for a two (2) year period. This supply will be used by the PW&U - StarTran Department for the acquisition of oil analysis reporting and related supplies as needed. The estimated cost for the two (2) year period is \$5,222.00.	Sponsor	Purchasing
	Program Departments, or Groups Affected	PW&U - StarTran
	Applicants/ Proponents	Applicant: Purchasing City Department: Other
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals Basis of Opposition
	Staff Recommend.	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommend.	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

DETAILS

POLICY/PROGRAM IMPACT

Resolution to provide Oil Analysis Reporting and Related Supplies, Quote 3900 from Tribologik Corporation, effective upon execution by both parties for a two (2) year period. This supply will be used by the PW&U - StarTran Department for the acquisition of oil analysis reporting and related supplies as needed. The estimated cost for the two (2) year period is \$5,222.00.	POLICY OR PROGRAM CHANGE	X NO <input type="checkbox"/> YES _____ _____ _____
	OPERATIONAL IMPACT ASSESSMENT	_____ _____ _____
	FINANCES	
	COST AND REVENUE PROJECTIONS	COST of total project: \$ COST of this Ordinance/ Resolution \$
		RELATED annual operating Costs \$
		INCREASE REVENUE EXPECTED/YEAR \$
	SOURCE OF FUNDS	CITY [Approximately] _____ \$ _____ % _____ \$ _____ % _____ \$ _____ % NON CITY [Approximately] _____ \$ _____ % _____ \$ _____ % _____ \$ _____ %
BENEFIT COST		
<input type="checkbox"/> Front Foot Assessment		Average
<input type="checkbox"/> Square Foot		\$ _____ \$ _____